EXHIBIT F

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

DEFENDANT	LAINTIFF LAINTIFF LAINTIFF BANK FSB EFENDANT SULL SILL SILL SILL SILL SILL SILL SILL					COURT CASE NUMBER O7 CV 6865 TYPE OF PROCESS	
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AT SEND NOTICE	ADDRESS (Street) 190 OF SERVICE COPY TO	or RFD: Apartment A Willis A D. REQUESTER AT	wenu	ie, stě	510 3 4 - 1 Number	14- III L-Mineolo of processito begging	<u> </u>
	David Go Eldma, W 120 Lexin Jew York	utan Ave	Sk 26.	9 <i>0</i>	l served w Number served in	of parties to be to this case	0
SPECIAL INSTR Telephone Number	EUCTIONS OR OTHER ess, and Estimated Time	s Available For Serv	ice) K	IST IN EXPEDITIN	سالم	(Include Business and	d Alternate Addresses, Chore depo
5es to bus	ve Mid He ass iness ad	eds of	歌	Stev	en Le		isiis ä
raja kalendari da k Kalendari da kalendari da kalend	ney or other Originator	North Committee of the State of	ehalf of:	Delantiff Defendan	TA.	ONE NUMBER D 931-87	5 OATE
SPACE BI	ELOW FOR U	SE OF U.S. N	/ARSHAI	ONLY — D	general and second	-4.	OW THIS LIE
than one USM 28	s indicated USM 285 jf more 5 is submitted).	Process District of Origin	District to Serve No. 54	Signature of Auth			Date
I hereby certify at on the individual,	id return that I ! have po company, corporation, e	ersonally served, [] hatcomes sho	ive legal evident wn above or on	e of service, ⊡ have he individual, compa	executed as s my, corporation	hown in "Remarks", the n, etc., shown at the a	c process described ddress inserted below
Thereby certi	ify and return that I am	unable to locate the	individual, co	npany, corporation,	etc., named	above (See remarks b	elow)
	Name and title of individual served (if not shown above)						f suitable age and dis
Name and title o		Knew				usual place	residing in the defend of abode.
Name and title o	e only if different than sh	BACV own abovel				Date of Service	residing in the defend
Name and title o	141 Px	BACV own above				usual place	residing in the defead of abode. Time S Marshal or Deputy
Name and title o	e only if different than sh	Forwarding Fee	Total Charges	Advance Deposits	Amount ow	Date of Service	Time S Marshal or Deputy
Name and title of A C 18 7	1437 PX e only if different than sh	Forwarding Fee	Total Charges	Advance Deposits	Amount ox	Usual place Date of Service 1 / 21 / 87 Signature of U.	Time S Marshal or Deputy
Name and title of A C187 Address (complete	e only if different than sh	Forwarding Fee	Total Charges	Advance Deposits	Amount on	Usual place Date of Service 1 / 21 / 87 Signature of U.	Time S Marshal or Deputy
Name and title of A C187 Address (complete Service Fee	Total Mileage Charges	Forwarding Fee	Total Charges	Advance Deposits	Amount on	usual place Date of Service	Time S Marshal or Deputy